

Factors affecting the outcome of ureteroscopy in the management of steinstrasse post Shock Wave Lithotripsy: Uni and multi variate analysis.

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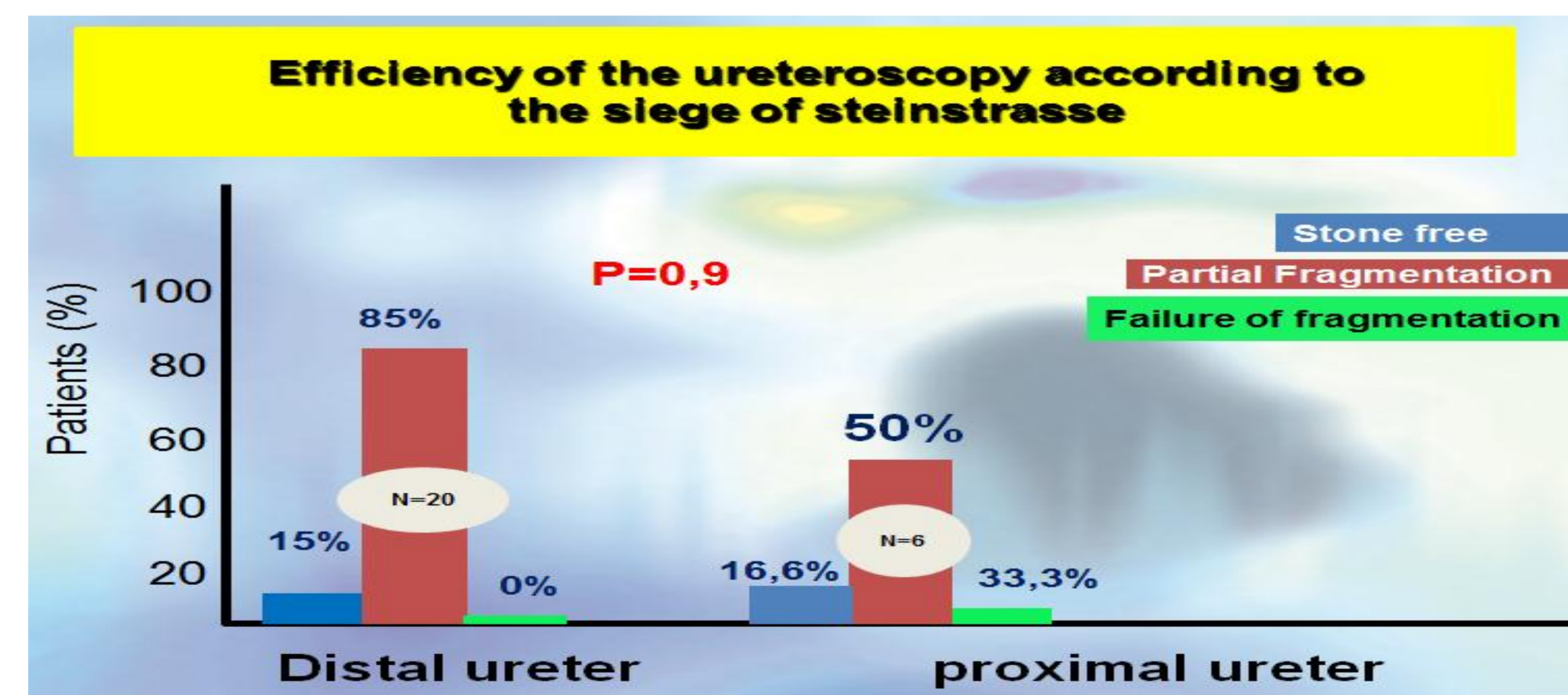
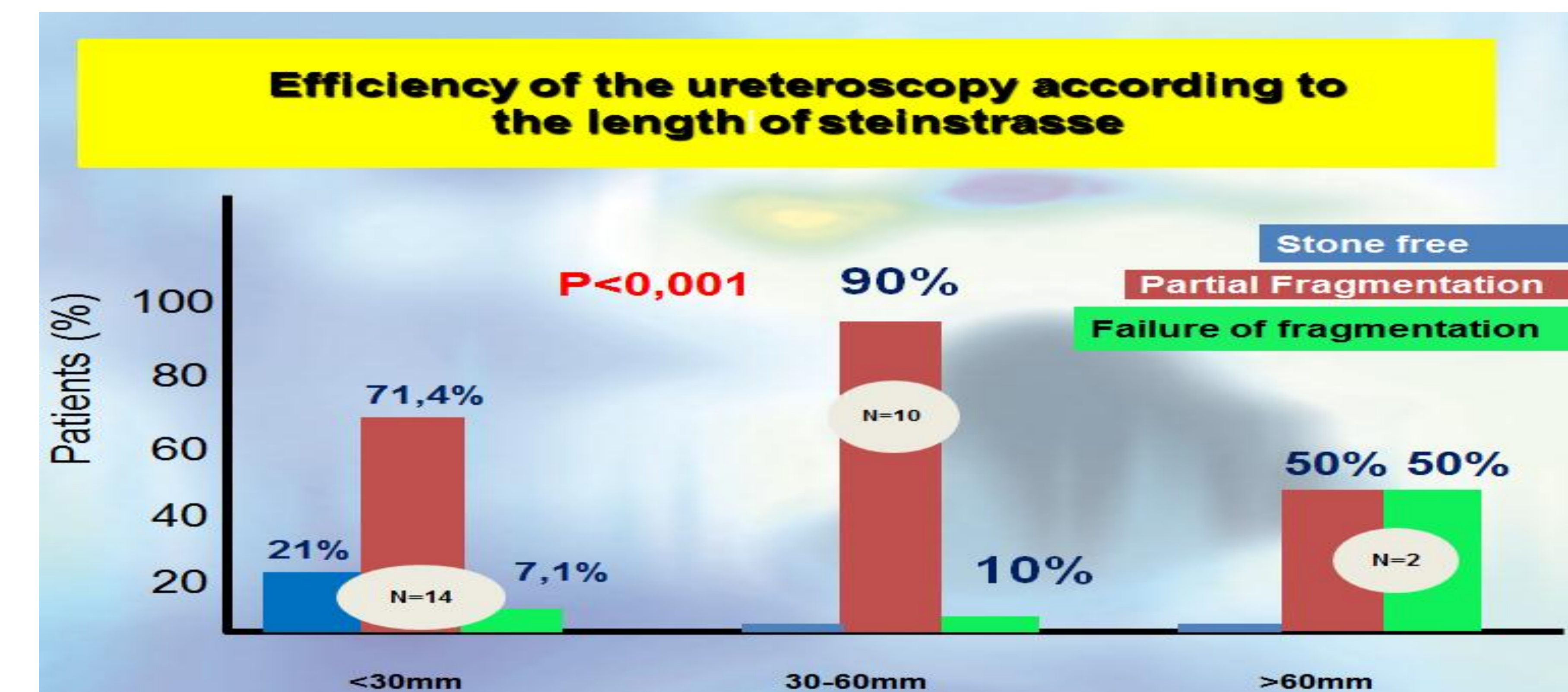
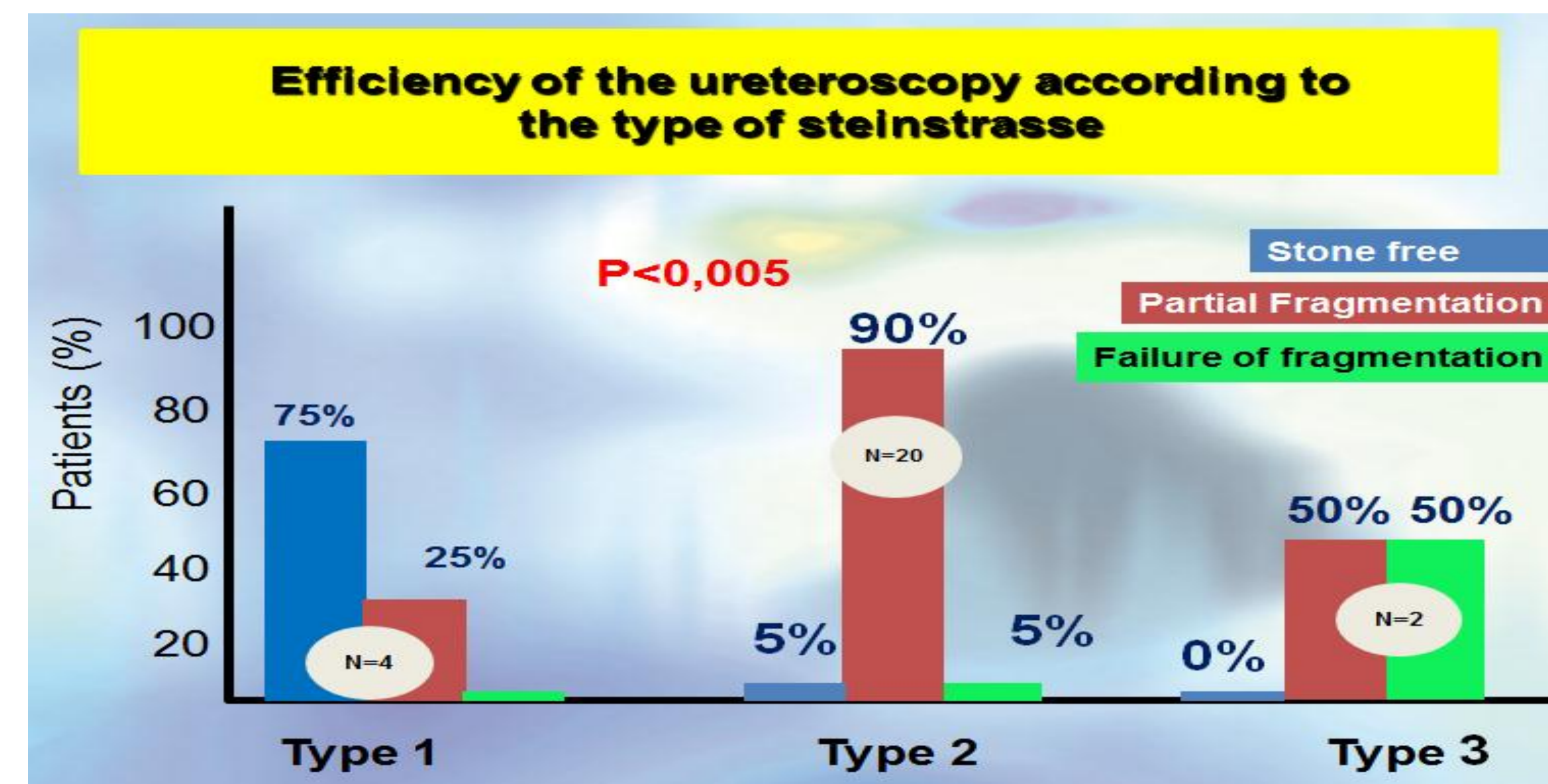
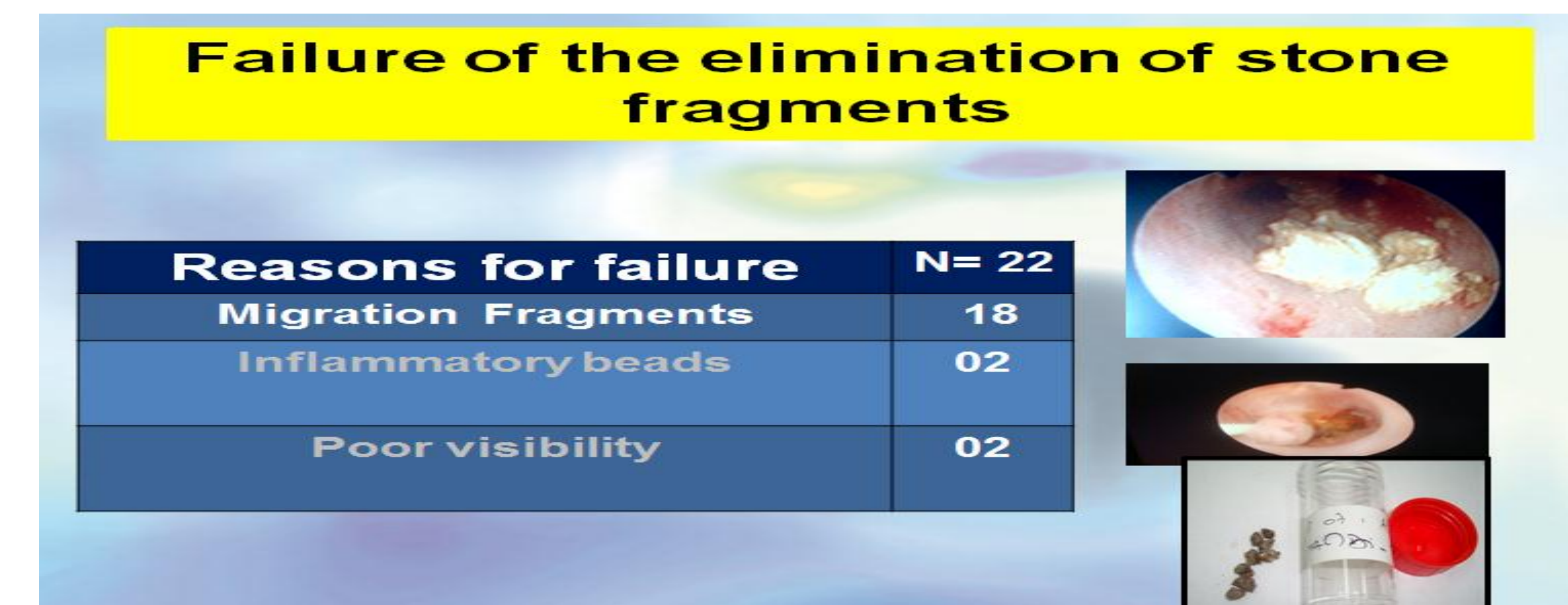
Aims

A steinstrasse is a well-recognized complication of the Extra Shock Wave Lithotripsy (ESWL) treatment. It is usually transient and asymptomatic. But it may cause partial or complete obstruction, renal renal colics, urinary tract infection and renal insufficiency. Our purpose was to evaluate the efficacy of ureteroscopy (URS) in the treatment of steinstrasse caused by ESWL and to identify predictors of failure.

Patients and methods

- Between January 2008 and Mai 2016;
 - 1130 patients were treated for urinary stones by EWSL;
 - This procedure was complicated by Steinstrasse (SS) in 32 patients (incidence = 3%);
 - They were 17 men and 15 women with a median age of 46,7 years (20-74yers);
 - The visual analog scale (VAS) score was estimated at 4,8.
 - All patients were treated by ureteroscopy (URS);
 - We used a rigid URS 8 CH and lithoclast disintegration device;
 - The parameters studied were: Initial stone size, side of SS, location of SS, length of the SS column and type of SS according to Coptcoat classification;
 - We made an analytical study (uni- and multi-variate) to identify predictors of failure of the Ureteroscopy;
- Successful treatment was defined as lasting pain relief and complete elimination of stone fragments one month after URS.

Results

Reasons for failure	N
Migration Fragments	18
Inflammatory beads	02
Poor visibility	02

Conclusion

Endoscopic treatment for steinstrasse is effective in more than half of the cases. Radiological type (2 and 3) and length of steinstrasse influence the outcomes.